

Physician Supplier Procedure Summary (PSPS) on IDR File Layout
AS OF: 08/25/2009

NAME	LENGTH	BEG	END	CONTENTS
1. HCPCS Code	5	1	5	<p>The Health Care Common Procedure Coding System (HCPCS) is a collection of codes that represent procedures, supplies, products and services which may be provided to Medicare beneficiaries and to individuals enrolled in private health insurance programs. The codes are divided into three levels, or groups as described below:</p> <p>Level I Codes and descriptors copyrighted by the American Medical Association's Current Procedural Terminology, Fourth Edition (CPT-4). These are 5 position numeric codes representing physician and nonphysician services.</p> <p>**** Note: **** CPT-4 codes including both long and short descriptions shall be used in accordance with the CMS/AMA agreement. Any other use violates the AMA copyright.</p> <p>Level II Includes codes and descriptors copyrighted by the American Dental Association's Current Dental Terminology, Third Edition (CDT-3). These are 5 position alpha-numeric codes comprising the D series. All other level II codes and descriptors are approved and maintained jointly by the alpha-numeric editorial panel (consisting of CMS, the Health Insurance Association of America, and the Blue Cross and Blue Shield Association). These are 5 position alpha-numeric codes representing primarily items and nonphysician services that are not</p>

represented in the level I codes.

Level III

Codes and descriptors developed by Medicare carriers for use at the local (carrier) level. These are 5 position alpha-numeric codes in the W, X, Y or Z series representing physician and nonphysician services that are not represented in the level I or level II codes.

2.	HCPCS Initial Modifier Code	2	6	7	A first modifier to the HCPCS procedure code to enable a more specific procedure identification for the line item service on the noninstitutional claim.
3.	Provider Specialty Code	2	8	9	CMS specialty code used for pricing the line item service on the noninstitutional claim.
4.	Carrier Number	5	10	14	The identification number assigned by CMS to a carrier authorized to process claims from a physician or supplier.
5.	Pricing Locality Code	2	15	16	Code denoting the carrier-specific locality used for pricing the service for this line item on the carrier claim (non-DMERC). For DMERCs, this field contains the beneficiary SSA State Code
6.	Type of Service Code	1	17	17	Code indicating the type of service, as defined in the CMS Medicare Carrier Manual, for this line item on the non-institutional claim.

7.	Place of Service Code	2	18	19	The code indicating the place of service, as defined in the Medicare Carrier Manual, for this line item on the noninstitutional claim.
8.	HCPCS Second Modifier Code	2	20	21	A second modifier to the HCPCS procedure code to make it more specific than the first modifier code to identify the line item procedures for this claim.
9.	Physician/Supplier Procedure Summary (PSPS) Submitted Service Count	14	22	35	The count of the total number of submitted services. Format: 9999999999.999
10.	Physician/Supplier Procedure Summary (PSPS) Submitted Charge Amount	13	36	48	The amount of charges submitted by the provider to Medicare. Format: +9999999999.99
11.	Physician/Supplier Procedure Summary (PSPS) Allowed Charge Amount	13	49	61	The amount that is approved (allowed) for Medicare. Format: +9999999999.99
12.	Physician/Supplier Procedure Summary (PSPS) Denied Services Count	14	62	75	The count of the number of submitted services that

are denied by Medicare.

Format: 9999999999.999

13. Physician/Supplier Procedure Summary (PSPS) Denied Charge Amount
13 76 88

The amount of submitted charges for which Medicare payment was denied.

Format: +999999999.99

14. Physician/Supplier Procedure Summary (PSPS) Assigned Services Count
14 89 102

The count of the number of services from providers accepting Medicare assignment.

Format: 9999999999.999

15. Physician/Supplier Procedure Summary (PSPS) NCH Payment Amount
13 103 115

The amount of payment made from the trust fund (after deductible and coinsurance amounts have been paid).

Format: +999999999.99

16. Physician/Supplier Procedure Summary (PSPS) HCPCS ASC Indicator Code
1 116 116

A Y/N code used to indicate whether the procedure is approved to be performed in an Ambulatory Surgical Center (ASC).

17. Physician Supplier Procedure Summary (PSPS) Error Indicator Code
2 117 118

The code used to indicate combinations of errors on key fields.

18. HCPCS Berenson-Eggers Type of Service Code (BETOS)
3 119 121

This field is valid beginning with 2003 data.
The Berenson-Eggers Type of Service (BETOS) for the
procedure code based on generally agreed upon clinically
meaningful groupings of procedures and services.

TABLE OF CODES APPENDIX
FROM IDR V2 Reference Views

BETOS Table

```
SELECT
PROD_BETOS_CD,
PROD_BETOS_SBCLSFCTN_CD_DESC
FROM VDM_VIEW_PTB_PRD.V2_PTB_BETOS_CD
WHERE PROD_BETOS_CLSFCTN_CD <> ''
```

PROD_BETOS_CD	PROD_BETOS_SBCLSFCTN_CD_DESC
D1A	MED/SURG SUPPLIES
D1B	HOSPITAL BEDS
D1C	OXYGEN AND SUPPLIES
D1D	WHEELCHAIRS
D1E	OTHER DME
D1F	PROSTHETIC/ORTHOTIC DEVICES
D1G	DRUGS ADMINISTERED THROUGH DME
I1A	STANDARD IMAGING - CHEST
I1B	STANDARD IMAGING - MUSCULOSKELETAL
I1C	STANDARD IMAGING - BREAST
I1D	STANDARD IMAGING - CONTRAST G.I.
I1E	STANDARD IMAGING - NUCLEAR MEDICINE
I1F	STANDARD IMAGING - OTHER
I2A	ADVANCED IMAGING - CAT/CT/CTA: BRAIN/HEAD/NECK
I2B	ADVANCED IMAGING - CAT/CT/CTA: OTHER
I2C	ADVANCED IMAGING - MRI/MRA: BRAIN/HEAD/NECK
I2D	ADVANCED IMAGING - MRI/MRA: OTHER
I3A	ECHOGRAPHY/ULTRASONOGRAPHY - EYE
I3B	ECHOGRAPHY/ULTRASONOGRAPHY - ABDOMEN/PELVIS
I3C	ECHOGRAPHY/ULTRASONOGRAPHY - HEART
I3D	ECHOGRAPHY/ULTRASONOGRAPHY - CAROTID ARTERIES
I3E	ECHOGRAPHY/ULTRASONOGRAPHY - PROSTATE - TRANSRECTAL
I3F	ECHOGRAPHY/ULTRASONOGRAPHY - OTHER
I4A	IMAGING PROCEDURE - HEART - INC CARDIAC CATH
I4B	IMAGING PROCEDURE - OTHER
M1A	OFFICE VISITS - NEW
M1B	OFFICE VISITS - ESTABLISHED
M2A	HOSPITAL VISITS - INITIAL
M2B	HOSPITAL VISITS - SUBSEQUENT
M2C	HOSPITAL VISITS - CRITICAL CARE

M3 EMERGENCY ROOM VISIT
M4A HOME VISIT
M4B NURSING HOME VISIT
M5A SPECIALIST - PATHOLOGY (HCPCS MOVED TO T1G IN 2003)
M5B SPECIALIST - PSYCHISTRY
M5C SPECIALIST - OPHTHALMOLOGY
M5D SPECIALIST - OTHER
M6 CONSULTATIONS
O1A AMBULANCE
O1B CHIROPRACTIC
O1C ENTERAL AND PARENTERAL
O1D CHEMOTHERAPY
O1E OTHER DRUGS
O1F HEARING AND SPEECH SERVICES
O1G IMMUNIZATIONS/VACCINATIONS
P0 ANESTHESIA
P1A MAJOR PROCEDURE - BREAST
P1B MAJOR PROCEDURE - COLECTOMY
P1C MAJOR PROCEDURE - CHOLECYSTECTOMY
P1D MAJOR PROCEDURE - TURP
P1E MAJOR PROCEDURE - HYSTERECTOMY
P1F MAJOR PROCEDURE - EXPLOR/DECOMPR/EXCIS DISC
P1G MAJOR PROCEDURE - OTHER
P2A MAJOR PROCEDURE - CARDIOVASCULAR - CABG
P2B MAJOR PROCEDURE - CARDIOVASCULAR - ANEURYSM REPAIR
P2C MAJOR PROCEDURE - CARDIOVASCULAR - THROMBOENDARTERECTOMY
P2D MAJOR PROCEDURE - CARDIOVASCULAR - CORONARY ANGIOPLASTY (PCTA)
P2E MAJOR PROCEDURE - CARDIOVASCULAR PACEMAKER INSERTION
P2F MAJOR PROCEDURE - CARDIOVASCULAR - OTHER
P3A MAJOR PROCEDURE - ORTHOPEDIC - HIP FRACTURE REPAIR
P3B MAJOR PROCEDURE - ORTHOPEDIC - HIP REPLACEMENT
P3C MAJOR PROCEDURE - ORTHOPEDIC - KNEE REPLACEMENT
P3D MAJOR PROCEDURE - ORTHOPEDIC - OTHER
P4A EYE PROCEDURES - CORNEAL TRANSPLANT
P4B EYE PROCEDURES - CATARACT REM/LENS INS
P4C EYE PROCEDURES - RETINAL DETACHMENT
P4D EYE PROCEDURES - TREATMENT OF RETINAL LESIONS
P4E EYE - OTHER
P5A AMBULATORY PROCEDURES - SKIN
P5B AMBULATORY PROCEDURES - MUSCULOSKELETAL
P5C AMBULATORY PROCEDURES - GROIN HERNIA REPAIR
P5D AMBULATORY PROCEDURES - LITHOTRIPSY

P5E	AMBULATORY PROCEDURES - OTHER
P6A	MINOR PROCEDURES - SKIN
P6B	MINOR PROCEDURES - MUSCULOSKELETAL
P6C	MINOR PROCEDURES - OTHER (MPFS)
P6D	MINOR PROCEDURES - OTHER (NON MPFS)
P7A	ONCOLOGY - RADIATION THERAPY
P7B	ONCOLOGY - OTHER
P8A	ENDOSCOPY - ARTHROSCOPY
P8B	ENDOSCOPY - UPPER G.I.
P8C	ENDOSCOPY - SIGMOIDOSCOPY
P8D	ENDOSCOPY - COLONOSCOPY
P8E	ENDOSCOPY - CYSTOSCOPY
P8F	ENDOSCOPY - BRONCHOSCOPY
P8G	ENDOSCOPY - LAPAROSCOPIC CHOLECYSTECTOMY
P8H	ENDOSCOPY - LARYNGOSCOPY
P8I	ENDOSCOPY - OTHER
P9A	DIALYSIS SERVICES (MPFS)
P9B	DIALYSIS SERVICES (NON MPFS)
T1A	LAB TESTS - ROUTINE VENIPUNCTURE (NOT MPFS)
T1B	LAB TESTS - AUTOMATED GENERAL PROFILES
T1C	LAB TESTS - URINALYSIS
T1D	LAB TESTS - BLOOD COUNTS
T1E	LAB TESTS - GLUCOSE
T1F	LAB TESTS - BACTERIAL CULTURES
T1G	LAB TESTS - OTHER (MPFS)
T1H	LAB TESTS - OTHER (NON-MPFS)
T2A	OTHER TESTS - ELECTROCARDIOGRAMS
T2B	OTHER TESTS - CARDIOVASCULAR STRESS TESTS
T2C	OTHER TESTS - EKG MONITORING
T2D	OTHER TESTS - OTHER
Y1	OTHER - MEDICARE FEE SCHEDULE
Y2	OTHER - NON MEDICARE FEE SCHEDULE
Z1	LOCAL CODES
Z2	UNDEFINED CODES

Carrier Number Table

```
SELECT
  CLM_CNTRCTR_NUM,
  CLM_CNTRCTR_NUM_DESC
FROM VDM_VIEW_PTB_PRD.V2_PTB_CLM_CNTRCTR_NUM
```

CLM_CNTRCTR_NUM	CLM_CNTRCTR_NUM_DESC
00000	PALMETTO GOV. BENEFITS ADMIN.
00510	ALABAMA (CAHABA)
00511	GEORGIA (CAHABA)
00512	MISSISSIPPI - (CAHABA)
00520	ARKANSAS BC/BS
00521	NEW MEXICO (ARKANSAS BCBS)
00522	OKLAHOMA (ARKANSAS BCBS)
00523	MISSOURI-EAST (ARKANSAS BCBS)
00524	RHODE ISLAND - (ARKANSAS BCBS)
00528	LOUISIANI(ARKANSAS BC/BS)
00542	CALIFORNIA (NHIC-NORTHERN CA)
00550	COLORADO (BLUE CROSS)
00570	PENNA. B/S (DE)
00580	PENNA. B/S (DC)
00590	FLORIDA (FIRST COAST)
00591	CONNECTICUT - (FIRST COAST)
00621	ILLINOIS BC/BS
00623	MICHIGAN (ILLINOIS B.S.)
00630	INDIANA (ADMINASTAR)
00635	DMERC-B (ADMINISTAR)
00640	IOWA (WELLMARK INC)
00650	KANSAS (BCBS KANSAS MOST OF)
00655	NEBRASKA (KANSAS BC/BS)
00660	KENTUCKY (ADMINISTAR)
00690	MARYLAND (BLUE CROSS)
00700	MASSACHUSETTS B/S
00710	MICHIGAN (ILLINOIS B.S.)
00720	MINNESOTA BC/BS(USE 10240)
00740	MISSOURI-WESTERN (KANSAS B/S)
00751	MONTANA(BC/BS MONTANA)
00770	NH/VT PHYSICIAN SERVICE
00780	MASSACHUSETTS B/S (NH/VT)
00801	NEW YORK-(HEALTHNOW)

00803 NEW YORK -(EMPIRE)
00805 NEW JERSEY (EMPIRE)
00811 DMERC A - (HEALTHNOW)
00820 NORTH DAKOTA (NORIDIAN)
00823 UTAH(NORIDIAN)
00824 COLORADO (NORIDIAN)
00825 WYOMING (NORIDIAN)
00826 IOWA (NORIDIAN)
00831 ALASKA (NORIDIAN)
00832 ARIZONA (NORIDIAN)
00833 HAWAII (NORIDIAN)
00834 NEVADA (NORIDIAN)
00835 OREGON (NORIDIAN)
00836 WASHINGTON (NORIDIAN)
00860 PENNSYLVANIA BC/BS (NJ)
00865 PENNSYLVANIA-(HIGHMARK)
00870 RHODE ISLAND BC/BS
00880 SOUTH CAROLINA (PALMETTO)
00882 RRB (S.C. PGBA)
00883 OHIO-(PALMETTO)
00884 WEST VIRGINIA-(PALMETTO)
00885 DMERC C (PALMETTO)
00889 SOUTH DAKOTA (NORIDIAN)
00900 TEXAS(TRAILBLAZER)
00901 MARYLAND (TRAILBLAZER)
00902 DELAWARE (TRAILBLAZER)
00903 DISTR COLUMBIA (TRAILBLAZER)
00904 VIRGINIA - (TRAILBLAZER)
00910 UTAH B/S
00930 WASHINGTON (AENTNA LIFE)
00932 WASHINGTON (AENTNA LIFE)
00951 WISCONSIN (WPS)
00952 ILLINOIS (WISCONSIN PHY. SER.)
00953 MICHIGAN (WISCONSIN PHY. SER.)
00954 MINNESOTA - (WPS)
00973 PUERTO RICO (TRIPLE S)
00974 VIRGIN ISLANDS(TRIPLE S)
01020 ALASKA (AETNA LIFE)
01030 ARIZONA (AETNA LIFE)
01040 GEORGIA (AETNA LIFE)
01102 PALMETTO GBA
01120 HAWAII (AETNA LIFE)

01192 PALMETTO GBA
01202 PALMETTO GBA
01290 NEVADA (AETNA LIFE)
01302 PALMETTO GBA
01360 NEW MEXICO (AETNA LIFE)
01370 OKLAHOMA (AETNA LIFE)
01380 OREGON (AETNA LIFE)
01390 WASHINGTON (AETNA LIFE)
02050 CALIFORNIA (TOLIC)
03070 CT GENERAL LIFE INSURANCE CO.
03102 ARIZONA (AZB)
03202 MONTANA (BC/BS MONTANA)
03302 NORTH DAKOTA (NORIDIAN)
03402 SOUTH DAKOTA (NORIDIAN)
03502 UTAH (NORIDIAN)
03602 WYOMING (NORIDIAN)
04102 TRAILBLAZER HEALTH ENTERPRISES
04202 TRAILBLAZER HEALTH ENTERPRISES
04302 TRAILBLAZER HEALTH ENTERPRISES
04402 TRAILBLAZER HEALTH ENTERPRISES
05102 WISCONSIN PHYS SVCS
05130 IDAHO (CIGNA)
05202 WISCONSIN PHYS SVCS INS CORP
05302 WISCONSIN PHYS SVCS INS CORP
05392 WISCONSIN PHYSICIANS SERV INS
05402 WISCONSIN PHYS SVCS INS CORP
05440 TENNESSEE(CIGNA)
05530 EQUICOR (WY)
05535 NORTH CAROLINA(CIGNA)
05655 DMERC D,ALASKA(CIGNA)
09102 FIRST COAST SERVICE OPTIONS
09202 FIRST COAST SERVICE OPTIONS
09302 FIRST COAST SERVICE OPTIONS
10071 THE TRAVELERS (RR)
10230 CONNECTICUT (METRAHEALTH)
10240 MINNESOTA (METRAHEALTH)
10250 MISSISSIPPI (METRAHEALTH)
10490 VIRGINIA (METRHEALTH)
10492 THE TRAVELERS (VA) (ORD STUDY)
10555 DMERC A, (TRAVELERS)
11260 MISSOURI (GEN AMERICAN LIFE)
12102 HIGHMARK MEDICAL CENTER

12202 HIGHMARK MEDICAL CENTER
12280 NEBR, MUTUTAL OF OMAHA
12302 HIGHMARK MEDICAL CENTER
12402 HIGHMARK MEDICAL CENTER
12502 HIGHMARK MEDICAL CENTER
13102 NATIONAL GOVERNMENT SERVICES
13202 NATIONAL GOVERNMENT SERVICES
13282 NATIONAL GOVERNMENT SERVICES
13292 NATIONAL GOVERNMENT SERVICES
14330 NEW YORK -(GROUP HEALTH INC)
16003 DMAC A (NATIONAL HERITAGE INS)
16360 OHIO (NATIONWIDE)
16510 WEST VIRGINIA (NATIONWIDE)
17003 DMAC B (ADMINASTAR FED)
18003 DMERC C(PALMETTO)
19003 DMAC D (NORIDIAN)
21200 MASSACHUSETTS BS (ME)
31140 CALIFORNIA (NHIC-NORTHERN CA)
31142 MAINE (NATL HERITAGE INS)
31143 MASSACHUSETTS (NATL HERITAGE)
31144 NEW HAMPSHIRE (NATL HERITAGE)
31145 VERMONT (NATL HERITAGE INS)
31146 CALIFORNIA-SOUTHERN (NHIC)
66001 NORIDIAN (CAP DRUG CONTRACTOR)

CMS Type of Service Table

```
SELECT
    CLM_FED_TYPE_SRVC_CD,
    CLM_FED_TYPE_SRVC_CD_DESC
FROM VDM_VIEW_PTB_PRD.V2_PTB_CLM_FED_TYPE_SRVC_CD
```

CLM_FED_TYPE_SRVC_CD	CLM_FED_TYPE_SRVC_CD_DESC
	OTHER TYPES OF SERVICE
0	WHL BLOOD/PCK RED CELLS
1	MEDICAL CARE
2	SURGERY
3	CONSULTATION
4	DIAGNOSTIC RADIOLOGY
5	DIAGNOSTIC LABORATORY
6	THERAPEUTIC RADIOLOGY

7	ANESTHESIA
8	ASSISTANT AT SURGERY
9	OTHER MED ITEMS/SERVS
A	USED DURABLE MEDICAL EQUIPMENT
B	HIGH RISK SCREEN-MAMMOG
C	LOW RISK SCREEN-MAMMOG
D	AMBULANCE
E	PEN SUPPLIES
F	ASC (FACILITY USAGE)
G	IMMUNOSUPPRESSIVE DRUGS
H	VISION ITEMS OR SERVICES (HOSPICE PRIOR 1/95)
I	PURCHASE OF DME (INSTALLMENT BASIS)
J	DIABETIC SHOES
K	HEARING ITEMS/SERVICES
L	RENAL SUPPLIES IN THE HOME
M	MTHLY CAP PAY-DIALYSIS
N	KIDNEY DONOR
O	
P	LUMP SUM-DME/PRO/ORTH
Q	VISION ITEMS/SERVICES
R	RENTAL OF DME
S	SURG DRESS/MED SUPPLIES
T	PSYCHOLOGICAL THERAPY
U	OCCUPATIONAL THERAPY
V	PNEU/FLU/HEP B VACCINE
W	PHYSICAL THERAPY
X	
Y	2ND OPIN-ELECTIVE SURG
Z	3RD OPIN-ELECTIVE SURGERY

Provider Specialty Table

```

SELECT
    CLM_FED_PRVDR_SPCLTY_CD,
    CLM_FED_PRVDR_SPCLTY_CD_DESC
FROM VDM_VIEW_PTB_PRD.V2_PTB_CLM_FED_PRVDR_SPCLTY_CD

CLM_FED_PRVDR_SPCLTY_CD CLM_FED_PRVDR_SPCLTY_CD_DESC
OTHER SPECIALTIES
00 CARRIER WIDEADIOLOGY
01 GENERAL PRACTICE

```

02	GENERAL SURGERY
03	ALLERGY/IMMUNOLOGY
04	OTOLARYNGOLOGY
05	ANESTHESIOLOGY
06	CARDIOLOGY
07	DERMATOLOGY
08	FAMILY PRACTICE
09	INTERVENTIONAL PAIN MANAGEMENT (EFF 2003)
10	GASTROENTEROLOGY
11	INTERNAL MEDICINE
12	OSTEOPATHIC MANIPULATIVE THER
13	NEUROLOGY
14	NEUROSURGERY
15	UNASSIGNED
16	OBSTETRICS/GYNECOLOGY
17	UNASSIGNED
18	OPHTHALMOLOGY
19	ORAL SURGERY (DENTISTS ONLY)
20	ORTHOPEDIC SURGERY
21	UNASSIGNED
22	PATHOLOGY
23	UNASSIGNED
24	PLASTIC/RECONSTRUCTIVE SURG
25	PHYSICAL MEDICINE AND REHAB
26	PSYCHIATRY
27	UNASSIGNED
28	COLORECTAL SURGERY
29	PULMONARY DISEASE
30	DIAGNOSTIC RADIOLOGY
31	UNASSIGNED
32	ANESTHESIOLOGIST ASSISTANT (EFF 2003)
33	THORACIC SURGERY
34	UROLOGY
35	CHIROPRACTIC
36	NUCLEAR MEDICINE
37	PEDIATRIC MEDICINE
38	GERIATRIC MEDICINE
39	NEPHROLOGY
40	HAND SURGERY
41	OPTOMETRY
42	CERTIFIED NURSE MIDWIFE
43	CRNA OR AA

44 INFECTIOUS DISEASE
45 MAMMOGRAPHY SCREENING CENTER
46 ENDOCRINOLOGY
47 INDEP TESTING FACILITY
48 PODIATRY
49 AMBULATORY SURGICAL CENTER
50 NURSE PRACTITIONERS
51 MED SUP COMP W/ORTHOTIC PERS
52 MED SUP COMP W/PROST PERS
53 MED SUP COMP W/PRO/ORTH PERS
54 MEDICAL SUP COMP NOT IN 51-53
55 IND ORTHOTIC PERSONNEL - CERT
56 IND PROSTHETIC PERSONNEL-CERT
57 IND PROS/ORTH PERSONNEL-CERT
58 MED SUP COMP - REG PHARMACIST
59 AMBULANCE SERVICE SUPPLIER
60 PUB HEALTH/WELFARE AGENCIES
61 VOL HEALTH/CHARITABLE AGEN
62 CLIN PSYCH(BILLING INDEP)
63 PORT X-RAY SUPP(BILL INDEP)
64 AUDIOLOGISTS (BILLING INDEP)
65 PHYSICAL THER(INDEP PRACT)
66 RHEUMATOLOGY
67 OCCUPATIONAL THERAPIST (INDEPENDENT PRACTICE)
68 CLINICAL PSYCHOLOGISTS
69 INDEPENDENT LAB(BILL INDEP)
70 MULTISPECIALTY CLIN/GRP PRACT
71 DIETICIAN/NUTRITIONIST (EFF 2002)
72 PAIN MANAGEMENT (EFF2002)
73 MASS IMMUNIZATION ROSTER (EFF 2003)
74 RADIATION THERAPY CENTER (EFF 2003)
75 SLIDE PREPARATION FAC (EFF 2003)
76 PERIPHERAL VASCULAR DISEASE
77 VASCULAR SURGERY
78 CARDIAC SURGERY
79 ADDICTION MEDICINE
80 LIC CLINICAL SOCIAL WORKER
81 CRITICAL CARE (INTENSIVISTS)
82 HEMATOLOGY
83 HEMATOLOGY/ONCOLOGY
84 PREVENTIVE MEDICINE
85 MAXILLOFACIAL SURGERY

86 NEUROPSYCHIATRY
87 ALL OTHER SUPPLIERS (DRUG AND DEPARTMENT STORES)
88 UNKOWN SUPPLIER/PROVIDER
89 CERTIFIED CLINICAL NURSE SPECIALIST
90 MEDICAL ONCOLOGY
91 SURGICAL ONCOLOGY
92 RADIATION ONCOLOGY
93 EMERGENCY MEDICINE
94 INTERVENTIONAL RADIOLOGY
95 CAP FOR PART B DRUG VENDORS
96 OPTICIAN
97 PHYSICIAN ASSISTANT
98 GYNECOLOGY/ONCOLOGY
99 UNKNOWN PHYSICIAN SPECIALTY
A0 HOSPITAL(DME)THERAPY
A1 SNF(DME)NAL THERAPY
A2 INTERMEDIATE CARE NURSING FAC(DME)
A3 NURSING FACILITY, OTHER(DME)
A4 HOME HEALTH AGENCY(DME)
A5 PHARMACY(DME)IVE SURG
A6 MEDICAL SUP COMP W/RESP THER(DME)
A7 DEPARTMENT STORE(DME)S
A8 GROCERY STORE(DME)
AA ALL SPECIALTIESUPPLIES
B1 SUPPLIER OF OXYGEN OR OXYGEN RELATED EQUIPMENT
B2 PEDORTHIC PERSONNEL
B3 MEDICAL SUPPLY COMPANY WITH PEDORTHIC PERSONNEL
B4 REHABILITATION AGENCY

Place of Service Table

```
SELECT
CLM_POS_CD,
CLM_POS_CD_DESC
FROM VDM_VIEW_PTB_PRD.V2_PTB_CLM_POS_CD
```

CLM_POS_CD	CLM_POS_CD_DESC
00	00
01	PHARMACY
03	SCHOOL
04	HOMELESS SHELTER
05	INDIAN HEALTH SVC
06	INDIAN HEALTH SVC
07	TRIBAL 638
08	TRIBAL 638
09	09
10	10
11	OFFICE
12	HOME
13	ASSISTED LIVING FACILITY
14	GROUP HOME
15	MOBILE UNIT
16	16
20	URGENT CARE FACILITY
21	INPATIENT HOSPITAL
22	OUTPATIENT HOSPITAL
23	EMERGENCY ROOM-HOSPITAL
24	AMBULATORY SURGICAL CNT
25	BIRTHING CENTER
26	MILITARY TREATMENT FAC
27	27
30	30
31	SKILLED NURSING FAC
32	NURSING FACILITY
33	CUSTODIAL CARE FAC
34	HOSPICE
35	ADULT LIVING CARE FAC
37	37
41	AMBULANCE - LAND
42	AMBULANCE-AIR OR WATER
49	INDEPENDENT CLINIC

50 FED. QUALIFIED HEALTH CTR
51 INPATIENT PSYCH FAC
52 PSYCH FAC PARTIAL HOSP
53 COMM MENTAL HEALTH CNT
54 INTER CARE FAC-MEN RET
55 RES SUB ABUSE TREAT FAC
56 PSYCH RES TREATMENT CNT
57 NON-RES SUB ABUSE TREAT FAC
58 58
60 MASS IMMUNIZATION CTR
61 COMP INPAT REHAB FAC
62 COM OUTPAT REHAB FAC
65 ESRD TREATMENT FAC
71 ST/LCL PUB HEALTH CLIN
72 RURAL HEALTH CLINIC
73 73
74 74
80 80
81 INDEPENDENT LABORATORY
83 83
85 85
86 86
88 88
91 91
97 97
99 OTHER UNLISTED FACILITY

Error Indicator Table

```
SELECT
  CLM_ERR_SGNTR_SK,
  CLM_ERR_SGNTR_DESC
FROM VDM_VIEW_PTB_PRD.V2_PTB_CLM_ERR_SGNTR
```

CLM_ERR_SGNTR_SK	CLM_ERR_SGNTR_DESC
-1	?
3	?
4	Invalid HCPCS
5	Invalid Specialty Code
6	Invalid Type of Service
7	Invalid Place of Service
8	Invalid HCPCS & Specialty code

9	Invalid HCPCS & Type of Service
10	Invalid HCPCS & Place of Service
11	Invalid Specialty Code & Type of Service
12	Invalid Specialty Code & Place of Service
13	Invalid Type of service & Place of Service
14	Invalid HCPCS, Specialty Code, & Type of Service
15	Invalid HCPCS, Specialty Code & Place of Service
16	Invalid HCPCS, Type of Service, & Place of Service
17	Invalid HCPCS, Specialty Code, Type of Service, & Place of Service
18	Invalid Specialty Code, Type of Service, & Place of Service
19	?
20	?

Disclaimer

New HCPCS codes **may be added, and existing codes may be updated or deleted during the year.**